UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK

In re:	§	
	§	**Chapter 11**
RESIDENTIAL CAPTIAL, L.L.C, et al.,	§	
	§	**Case No. 12-12020(MG)**
	§	
Debtors.	§	**Jointly Administered**

DECLARATION OF GREGORY C. MORSE STATING REASONS FOR EXCUSABLE NEGLECT OF THE DEADLINE FOR FILING A NOTICE OF APPEAL

In support of this motion and in accordance with FRBP 8002(c)(2), Claimant Morse submits his "Declaration Of Gregory C. Morse" which explains the reasons for the excusable neglect that caused Claimant Gregory C. Morse to miss the 14 day deadline as defined in FRBP 8002(a).

I, Claimant and Creditor, Gregory C. Morse, NameID #10987575, pursuant to 28 U.S.C. §1746, hereby declare the following statements:

1. I make this declaration on the basis of my personal knowledge of the facts stated in this document.

2. On Friday, June 6, 2014 at 3:48:04 PM Eastern Standard Time, Judge Martin Glenn published on Pacer, "*Memorandum Opinion and Order Sustaining ResCap Borrower Claims Trust's Objection to Proofs of Claim Filed by Gregory C. Morse*," Docket Number 7069.

3. The link to this order was sent by Clarissa D. Cu to the email address, pilot7503@yahoo.com which is on file with the Bankruptcy Court, on Friday, June 6, 2014 at 3:41 PM Central Standard Time.

4. I, Gregory C. Morse, did not personally become aware of this email until 9:53 PM on Friday, June 6, 2014.

5. The Court was made aware of the health problems of my parents in Docket Number 6880 filed on May 7, 2014.

6. On Sunday, June 8, 2014, I became suspicious that a series of psychotic episodes my father was having were due to his reaction to the doctor prescribed drug Donepezil.

7. Donepezil is the chemical name of the prescription drug given to him to attempt to reduce the symptoms of dementia. See "*Cholinesterase Inhibitor for Alzheimer's Disease*" attached to this declaration as EXHIBIT A.

8. A letter to the Journal of Psychiatry & Neuroscience states that various types of manias have been induced by the taking of Donepezil. See "*Manias Associated with Donepezil*" attached to this declaration as EXHIBIT B.

9. I and my mother on Monday, June 9, 2014, immediately stopped him from taking any further doses of Donepezil.

10. Because it is believed that Donepezil has a half-life in the body of 70 hours, I visited my parents every day until Saturday, June 14, 2014 to insure that this drug had completely, to my satisfaction, been purged from of his system. See the second paragraph on Page 1 of "*Donepezil – Wikipedia*" attached to this declaration as EXHIBIT C.

11. Because the Law Library in Collin County, Texas is located in McKinney, Texas and the library is open Monday through Friday for 8 hours a day and due to all the major highway construction on U.S. 75 between Murphy, Texas and McKinney, Texas, each trip to the library is approximately 45 minutes in each direction. Due to these reasons outside of my control, my research time during this period in question has been extremely hindered and effected.

12. Since the numerous Federal Rules of Civil Procedure (FRCP), the Federal Rules of Bankruptcy Procedure (FRBP), the Local Rules of the Southern New York U.S. Bankruptcy Court, various Sections of the United States Code, the Federal Rules of Appellate Procedure (FRAP) and the Local Rules of the U. S. Court of Appeals, Second Circuit, many hours of my time are required to research all options available to me in responding appropriately to the "*Memorandum Opinion and Order Sustaining ResCap Borrower Claims Trust's Objection to Proofs of Claim Filed by Gregory C. Morse.*"

13. As I am a Pro Se Claimant and must mail all paper filings to the Clerk of the Court, in order to make the 14 day deadline for filing a Notice of Appeal in accordance with FRBP

8002(c), all of the necessary paperwork would have to have been completed by Tuesday evening, June 17, 2014, for a Wednesday mailing for second day delivery to the Court by Friday, June 20.

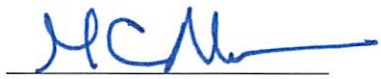
14. As it was impossible for me to research the necessary Sections of the FRCP, FRBP, FRAP, local rules of both the Southern New York Bankruptcy Court and the Secord Circuit Court of the U.S. Court of Appeals and prepare the filings of the necessary documents in two (2) days, it was impossible for me to mail the required documents on Wednesday, June 18, 2014 such that the required filings would be received by the Court prior to the deadline on Friday, June 20, 2014.

15. To my best knowledge and belief, since I am a Pro Se Litigant and thus am not accorded the right to electronically file pleadings or other documents with the Court and due to the required intervention by me to help preserve the life of my father due to allergic reactions to the psychotropic drug Donepezil, the fourteen (14) day deadline imposed by FRBP 8002(a) is extremely prejudicial.

16. To my best knowledge and belief, Paragraphs 1 through 15 above outline substantial and justifiable reasons for the excusable neglect of FRBP Rule 8002(a) and, therefore, support and warrant the granting to me of an extension of the deadline to file a Notice of Appeal as is offered to Bankruptcy Court litigants pursuant to Rule 8002(c)(2).

I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct.

Executed on this the 20th day of June, 2014



Gregory C. Morse, *Pro Se*
Claimant and Creditor NameID # 10987575

EXHIBIT A

Article Link: http://www.webmd.com/alzheimers/cholinesterase-inhibitors-for-alzheimers-disease

Alzheimer's Disease Health Center

Cholinesterase Inhibitors for Alzheimer's Disease

Examples

Generic Name	Brand Name
donepezil	Aricept
galantamine	Razadyne
rivastigmine	Exelon

How It Works

Acetylcholine is a neurotransmitter (a brain chemical) that helps with memory and thinking. Alzheimer's disease breaks down acetylcholine. And people who have Alzheimer's disease make less of this chemical over time. These two things result in the gradual loss of memory and thinking skills.

Medicines called cholinesterase inhibitors help stop acetylcholine from breaking down. They can help brain cells work better. But they don't stop or reverse the destruction of brain cells and loss of acetylcholine that occur in Alzheimer's disease. They don't prevent the disease from getting worse, but they may slow it down.

These medicines don't make acetylcholine, though. So over time they may stop working.

Why It Is Used

Cholinesterase inhibitors may be used to treat some symptoms of Alzheimer's disease. They also may be used in other types of dementia, such as dementia with Lewy bodies and multi-infarct dementia.

Experts agree that reducing problems with memory loss may help people with Alzheimer's disease live better. In some cases, reducing these problems may help people live more independently for a longer period of time.

How Well It Works

Cholinesterase inhibitors may produce small improvements in memory and general ability to function. For example, the person may be able to remember friends' names better and be able to dress himself or herself with less difficulty.

The various cholinesterase inhibitors have similar effects on memory and cognitive function. So the decision

about what medicine to use may be based on side effects, dosing schedules and ease of use, individual response to a particular medicine, or other factors.

Cholinesterase inhibitors do not work for everyone who has Alzheimer's disease, but they are helpful for some people. They may be a reasonable option for those who understand the risks and costs and feel the possible benefits are worth it. As the disease progresses, the medicine eventually may stop working.

Side Effects

All medicines have side effects. But many people don't feel the side effects, or they are able to deal with them. Ask your pharmacist about the side effects of each medicine you take. Side effects are also listed in the information that comes with your medicine.

Here are some important things to think about:

- Usually the benefits of the medicine are more important than any minor side effects.
- Side effects may go away after you take the medicine for a while.
- If side effects still bother you and you wonder if you should keep taking the medicine, **call your doctor**. He or she may be able to lower your dose or change your medicine. Do not suddenly quit taking your medicine unless your doctor tells you to.

Call 911 **or other emergency services right away** if you have:

- Trouble breathing.
- Swelling of your face, lips, tongue, or throat.

Call your doctor if you have:

- Hives.

Common side effects of this medicine include:

- Nausea.
- Diarrhea.
- Vomiting.
- Indigestion.
- Loss of appetite and weight loss.

See Drug Reference for a full list of side effects. (Drug Reference is not available in all systems.)

What To Think About

Rivastigmine (Exelon) can be given through a skin patch. Skin patches release medicine into the blood at a steady level and may reduce side effects. And when a person uses a skin patch, it's easier for caregivers to be sure the person is getting his or her medicine properly.

Taking medicine

EXHIBIT A

Medicine is one of the many tools your doctor has to treat a health problem. Taking medicine as your doctor suggests will improve your health and may prevent future problems. If you don't take your medicines properly, you may be putting your health (and perhaps your life) at risk.

There are many reasons why people have trouble taking their medicine. But in most cases, there is something you can do. For suggestions on how to work around common problems, see the topic Taking Medicines as Prescribed.

Checkups

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

Complete the new medication information form (PDF) to help you understand this medication.

By	Healthwise Staff
Primary Medical Reviewer	Anne C. Poinier, MD - Internal Medicine
Specialist Medical Reviewer	Myron F. Weiner, MD - Psychiatry, Neurology
Last Revised	October 29, 2012

Top Picks
6 Serious Symptoms You Should Never Ignore
Marijuana May Ease Alzheimer's Symptoms
Natural Remedies for Dry Mouth
Top Tips for Caregivers
Male Brains vs. Female Brains
Brain Foods for Better Focus

WebMD Medical Reference from Healthwise
Last Updated: October 29, 2012

My Notes:

Mania associated with donepezil

There have been reports of agitation, depression, anxiety, paranoia, and aggression associated with the acetylcholinesterase inhibitor donepezil, used in the treatment of dementia.[1,2] I would like to report 4 patients with dementia who became manic after donepezil treatment. A MEDLINE search found only one similar report.[3]

The 4 patients were aged 78, 64, 74 and 68 years; 3 were women and 1 was a man. They had mild to severe dementia, as well as a major depressive disorder (patient 1), bipolar I disorder (patients 2 and 3), or delusional disorder (patient 4). When donepezil (5 mg per day) was started to improve memory, patients 1 and 2 were depressed, patient 3 was in remission, and patient 4 was delusional.

Other daily medication regimens were as follows:

- Patient 1: alprazolam (1 mg) and nortriptyline (20 mg)
- Patient 2: lamotrigine (50 mg), fluoxetine (20 mg), lorazepam (1 mg), verapamil (60 mg) (a calcium-channel blocker prescribed for hypertension), atenolol (100 mg) (a β-adrenergic blocker prescribed for hypertension), gliquidone (600 mg) (a sulfonylurea prescribed for diabetes mellitus)
- Patient 3: enalapril (2.5 mg) (for hypertension), carbidopa/levodopa (25/250 mg) (for parkinsonism), and lorazepam (1 mg)
- Patient 4: terazosin (5 mg) (a α-1-selective adrenergic receptor blocker prescribed for prostatic enlargement).

After 3 to 7 days of treatment with donepezil (5 mg per day in patients 1, 2 and 4; 10 mg per day in patient 3), mania developed suddenly in patients 1 and 4, and hypomania in patients 2 and 3. The main symptoms were euphoric mood, insomnia, pressured speech, flight of ideas, psychomotor agitation, hyperactivity, disorientation, and marked impairment of functioning in patient 1; euphoric mood, insomnia, hyperactivity, and pressured speech in patient 2; euphoric mood, hyperactivity, agitation, and logorrhea in patient 3; and irritability, aggressivity, insomnia, psychomotor agitation, worsening of delusions, and marked impairment of functioning in patient 4. Donepezil was discontinued after 4 to 7 days in the 2 manic patients, after 2 weeks in one of the hypomanic patients and after 2 months in the other.

After discontinuation of donepezil, the mania and hypomania resolved spontaneously in 1 to 7 days. Ten days to 1 month after remission, donepezil (5 mg per day) was restarted in the 2 patients who had had mania. In both, the mania recurred within a day. Donepezil was discontinued after 2 days, and there was a remission of mania within a week; this was spontaneous in one patient, and associated with antipsychotic treatment in the other.

The close temporal association between the start of donepezil and the appearance of mania or hypomania, the rapid resolution of mania soon after discontinuation of donepezil, and the recurrence of this pattern in a second trial, suggest a causal link. In the 2 patients with bipolar disorder, a spontaneous switch cannot be excluded, but the timing of the mania or hypomania suggests a strong association with donepezil. Cholinomimetic agents can improve mania and cause depression, while anticholinergic agents can have mood-elevating effects.[4] These observations may militate against a causal role of the cholinergic agent donepezil. However, when the central cholinergic system is activated by the cholinesterase inhibitor physostigmine, the noradrenergic and dopaminergic systems can be activated, causing a rebound of manic symptoms.[4] This mechanism might explain the effects of donepezil in these patients. Bipolar vulnerability in 2 patients may have facilitated this action. Pharmacodynamic interactions of donepezil with concurrent psychoactive drugs may also have been involved in the onset of mania or hypomania. As well, the anticholinergic agent nortriptyline, the calcium-channel blocker verapamil, the β-adrenergic blocker atenolol, the α-adrenergic blocker terazosin, and the dopamine agonist levodopa, act on the monoamine and acetylcholine systems, which are involved in mood disorders.[5] These may have interacted with the cholinergic agent donepezil, causing dysfunctions in these systems, and favouring the

onset of mania or hypomania. Delirium with manic features, caused by the combination of medications, might also account for this clinical picture.

Franco Benazzi, MD
Forlì, Italy

References

1. Wengel SP, Roccaforte WH, Burke WJ, Bayer BL, Mcneilly DP, Knop D. Behavioral complications associated with donepezil. *Am J Psychiatry* 1998; 155:1632-3.
2. Bouman WP, Pinner G. Violent behavior associated with donepezil. *Am J Psychiatry* 1998;155:1626-7.
3. Benazzi F. Mania associated with donepezil. *Int J Geriatr Psychiatry* 1998;13:814-5.
4. Janowsky DS, Overstreet DH. Acetylcholine. In: Goodnick PJ, editor. *Mania. Clinical and research perspectives.* Washington (DC): American Psychiatric Press; 1998. p. 135-55.
5. Goodwin FK, Jamison KR. *Manic-depressive illness.* New York: Oxford University Press; 1990.

EXHIBIT C

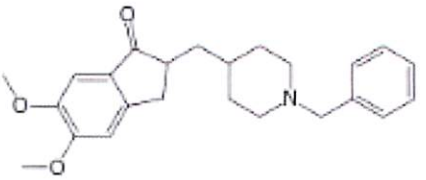
Donepezil

From Wikipedia, the free encyclopedia

Donepezil, marketed under the trade name **Aricept** by its developer Eisai and partner Pfizer, and now sold as a generic by multiple suppliers, is a centrally acting reversible acetylcholinesterase inhibitor.[1] Its main therapeutic use is in the palliative treatment of Alzheimer's disease.[2] Common side effects include gastrointestinal upset. It has an oral bioavailability of 100% and easily crosses the blood–brain barrier. Because it has a biological half-life of about 70 hours, it can be taken once a day.

Contents

Donepezil



Systematic (IUPAC) name

(*RS*)-2-[(1-benzyl-4-piperidyl)methyl]- 5,6-dimethoxy-2,3-dihydroinden-1-one

Clinical data	
Trade names	Aricept
AHFS/Drugs.com	monograph
MedlinePlus	a697032
Pregnancy cat.	C
Legal status	℞ Prescription only
Routes	Oral tablet, 5,10 & 23mg
Pharmacokinetic data	
Bioavailability	100 (%)
Protein binding	96%
Half-life	70 hours
Excretion	0,11-0,13 (l/h/kg)
Identifiers	
CAS number	120014-06-4 ✓
ATC code	N06DA02
PubChem	CID 3152
DrugBank	DB00843
ChemSpider	3040 ✓
UNII	8SSC91326P ✓
KEGG	D07869 ✓
ChEBI	CHEBI:53289 ✓
ChEMBL	CHEMBL502 ✓
PDB ligand ID	E20 (PDBe, RCSB PDB)
Chemical data	
Formula	$C_{24}H_{29}NO_3$

Medical uses

Alzheimer's disease

Currently, no definitive proof shows the use of donepezil or other similar agents alters the course or progression of Alzheimer's disease (AD). However, 6 to 12-month controlled studies have shown modest benefits in cognition and/or behavior.[3] Pilot studies have reported donepezil therapy may potentially have effects on markers of disease progression, such as hippocampal volume. Therefore, many neurologists, psychiatrists, and primary-care physicians use donepezil in patients with Alzheimer's disease. In 2005,

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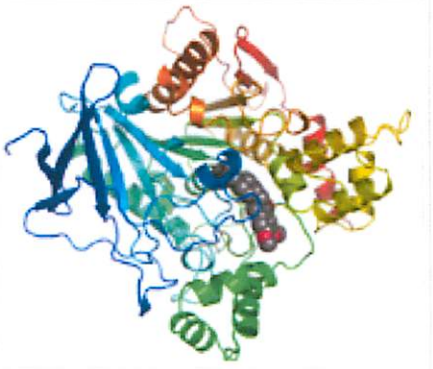
the UK National Institute for Clinical Excellence (NICE) withdrew its recommendation for use of the drug for *mild*-to-moderate AD, on the basis of no significant improvement in functional outcome, quality of life, or behavioral symptoms. However, NICE revised its guidelines to suggest donepezil be used in moderate-stage patients for whom the evidence is strongest.

Mol. mass	379.492 g/mol
SMILES	
InChI	

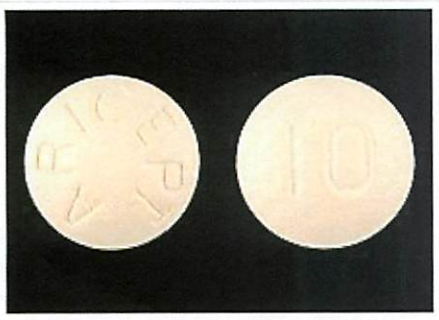
✓ **(what is this?) (verify)**



Donepezil inhibiting *Torpedo californica* acetylcholinesterase. See *Proteopedia 1eve (http://www.proteopedia.org/wiki/index.php/1eve)*.

While the drug is currently indicated for mild to moderate Alzheimer's, evidence from two clinical trials also indicates it may be effective for moderate to severe disease. An example of this is a Karolinska Institute paper published in *The Lancet* in early 2006, which states donepezil improves cognitive function even in patients with severe AD symptoms.[4] In Oct. 2006 the U.S. Food and Drug Administration also approved Aricept for treatment of severe dementia.

Dosage



10mg Aricept pill

In mild to moderate Alzheimer's Disease, a starting dose of 5 mg given once daily should be used. In a minimum of four to six weeks, an increase to 10 mg is recommended. The usual dose is 5 to 10 mg once daily. Moderate to severe AD indicates the same regimen, but in a minimum of three months, a patient may receive a dose of 23 mg once daily. Dementia patients should receive 5–10 mg once daily. The maximum daily dose is 23 mg once daily.[5] Clinicians should use caution in prescribing the maximum daily dose as the risk of severe side effects may outweigh the unclear clinical benefits.[6] In the UK, the maximum licensed dose is 10 mg.

Contraindications

Donepezil (Aricept) should be used with caution in patient with cardiac disease, cardiac conduction disturbances, chronic obstructive pulmonary disease, asthma, severe cardiac arrhythmias and sick sinus syndrome. Patients with gastrointestinal disorders should use caution because nausea or vomiting may occur. These symptoms may appear more frequent when initiating treatment or increasing the donepezil dose. Although occurrence of seizures is rare, patients who have a predisposition to seizures should be treated with caution.[5] The British Medical Journal (BMJ) cautioned that the largest dosage, 23 mg, was crafted to extend patent protection rather than for medical reasons,[7] and was not shown to be more effective compared to the 10 mg dose.

Other

Donepezil has been tested (off label) in other cognitive disorders, including Lewy body dementia,[8]

and vascular dementia,[9] but it is not currently approved for these indications. Donepezil has also been found to improve sleep apnea in Alzheimer's patients.[10]

Donepezil has also been studied in patients with mild cognitive impairment, schizophrenia, attention deficit disorder, post-Coronary artery bypass surgery cognitive impairment,[11] cognitive impairment associated with multiple sclerosis, CADASIL syndrome, and Down syndrome. A three-year National Institutes of Health trial in patients with mild cognitive impairment reported donepezil was superior to placebo in delaying rate of progression to dementia during the initial 18 months of the study, but this was not sustained at 36 months. In a secondary analysis, a subgroup of individuals with the apolipoprotein E4 genotype showed sustained benefits with donepezil throughout the study.[12] At this time, though, donepezil is not indicated for prevention of dementia.

A 2001 study suggested that donepezil can improve speech in autistic children. The study found the speech of autistic children that was originally mildly to moderately affected appeared to improve with the use of donepezil.[13][14]

Adverse effects

Common side effects include bradycardia, nausea, diarrhea, anorexia, abdominal pain, and vivid dreams.

In 2006, Eisai, the manufacturer, issued a statement that a single vascular dementia study found a difference in the percentage of study participants who died in the donepezil group (1.7%) versus the placebo group (0%). This could be due to an unusually low death rate on the placebo group. An analysis of all three vascular dementia trials, according to Eisai, "shows no statistically significant differences in observed mortality rates between the donepezil and placebo groups."

Several cases of mania induced by Donepezil have been reported.[15] [16] [17] [18]

Development and marketing

Research leading to the development of donepezil began in 1983 at Eisai, and the first Phase I clinical trial took place in 1989.[19] In 1996, Eisai received approval from the United States Food and Drug Administration (USFDA) for donepezil under the brand *Aricept*, which it co-marketed with Pfizer. As of 2011, Aricept was the world's best-selling Alzheimer's disease treatment.[20] The first generic donepezil became available in November 2010 with the USFDA approval of a formulation prepared by Ranbaxy Labs.[21] In April 2011 a second generic formulation, from Wockhardt, received tentative USFDA marketing approval.[22]

See also

- Hachiro Sugimoto

References

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1. ^ Birks J, Harvey RJ (2006). "Donepezil for dementia due to Alzheimer's disease". In Birks, Jacqueline. *Cochrane Database Syst Rev* (1): CD001190. doi:10.1002/14651858.CD001190.pub2 (http://dx.doi.org/10.1002%2F14651858.CD001190.pub2). PMID 16437430 (https://www.ncbi.nlm.nih.gov/pubmed/16437430).
2. ^ "aricept" (http://www.drugs.com/monograph/aricept.html). *The American Society of Health-System Pharmacists*. Retrieved 3 April 2011.
3. ^ Steele LS, Glazier RH (April 1999). "Is donepezil effective for treating Alzheimer's disease?" (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2328349). *Can Fam Physician* **45**: 917–9. PMC 2328349 (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2328349). PMID 10216789 (https://www.ncbi.nlm.nih.gov/pubmed/10216789).
4. ^ "Drug 'treats severe Alzheimer's' " (http://news.bbc.co.uk/2/hi/health/4832574.stm). *BBC News*. 2006-03-23. Retrieved 2007-07-24.
5. ^ *a b* Aricept (donepezil hydrochloride) package insert. Woodcliff Lake, NJ: Eisai Co., Ltd.; 2010 Nov.
6. ^ How the FDA forgot the Evidence: the case of Donepezil 23 mg. BMJ 2012;344:e1086
7. ^ LA Times, 2012-03-22 (http://articles.latimes.com/2012/mar/22/health/la-he-aricept-fda-20120323) New Alzheimer's Pill Likely To Cause Misery
8. ^ Rojas-Fernandez CH (February 2001). "Successful use of donepezil for the treatment of dementia with Lewy bodies" (http://www.theannals.com/cgi/pmidlookup?view=long&pmid=11215841). *Ann Pharmacother* **35** (2): 202–5. doi:10.1345/aph.10192 (http://dx.doi.org/10.1345%2Faph.10192). PMID 11215841 (https://www.ncbi.nlm.nih.gov/pubmed/11215841).
9. ^ Malouf R, Birks J (2004). "Donepezil for vascular cognitive impairment". In Malouf, Reem. *Cochrane Database Syst Rev* (1): CD004395. doi:10.1002/14651858.CD004395.pub2 (http://dx.doi.org/10.1002%2F14651858.CD004395.pub2). PMID 14974068 (https://www.ncbi.nlm.nih.gov/pubmed/14974068).
10. ^ Moraes W, Poyares D, Sukys-Claudino L, Guilleminault C, Tufik S (March 2008). "Donepezil improves obstructive sleep apnea in Alzheimer disease: a double-blind, placebo-controlled study" (http://www.chestjournal.org/cgi/pmidlookup?view=long&pmid=18198262). *Chest* **133** (3): 677–83. doi:10.1378/chest.07-1446 (http://dx.doi.org/10.1378%2Fchest.07-1446). PMID 18198262 (https://www.ncbi.nlm.nih.gov/pubmed/18198262).
11. ^ Doraiswamy PM (2007). "Donepezil for cognitive decline following coronary artery bypass surgery: a pilot randomized controlled trial." (http://www.ncbi.nlm.nih.gov/pubmed/?term=17514186). *Psychopharmacology Bulletin* **40** (2): 54–62. PMID 17514186 (https://www.ncbi.nlm.nih.gov/pubmed/17514186).

EXHIBIT C

12. ^ Petersen, RC; Thomas, RG; Grundman, M; Bennett, D; Doody, R; Ferris, S; Galasko, D; Jin, S; Kaye, J; Levey, A; Pfeiffer, E; Sano, M; van Dyck, CH; Thal, LJ; Alzheimer's Disease Cooperative Study, Group (Jun 9, 2005). "Vitamin E and donepezil for the treatment of mild cognitive impairment.". *The New England journal of medicine* **352** (23): 2379–88. doi:10.1056/nejmoa050151 (http://dx.doi.org/10.1056%2Fnejmoa050151). PMID 15829527 (https://www.ncbi.nlm.nih.gov/pubmed/15829527).
13. ^ "Alzheimer's Drug Shows Promise As Treatment for Autism -- Arehart-Treichel" (http://pn.psychiatryonline.org/cgi/content/full/36/22/16-a). *Psychiatric News* (pn.psychiatryonline.org). 2001-11-16. Retrieved 2009-08-18.
14. ^ Donepezil hydrochloride: a double-blind study in autistic children (https://tspace.library.utoronto.ca/bitstream/1807/1649/1/pn03015.pdf)
15. ^ Benazzi F (November 1999). "Mania associated with donepezil" (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1189062). *J Psychiatry Neurosci* **24** (5): 468–9. PMC 1189062 (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1189062). PMID 10586539 (https://www.ncbi.nlm.nih.gov/pubmed/10586539).
16. ^ Collins C; Copeland B; Croucher M (2011). "Bipolar affective disorder, type II, apparently precipitated by donepezil.". *Int Psychogeriatr* **23**: 503–504. doi:10.1017/s1041610210002206 (http://dx.doi.org/10.1017%2Fs1041610210002206).
17. ^ Rao V; Ovitt L; Robbins B (2008). "Donepezil induced hypomania.". *Jour Neuropsychiatry Clin Neurosci 2008;* **20**: 107. doi:10.1176/appi.neuropsych.20.1.107 (http://dx.doi.org/10.1176%2Fappi.neuropsych.20.1.107).
18. ^ Sarah Wicklund, M.D.; Mark Wright, M.D. (2012). "Donepezil-Induced Mania,". *The Journal of Neuropsychiatry and Clinical Neurosciences 2012;* **24**: E27–E27. doi:10.1176/appi.neuropsych.11070160 (http://dx.doi.org/10.1176%2Fappi.neuropsych.11070160).
19. ^ Sugimoto, Hachiro; Ogura, Hiroo; Arai, Yasuo; Iimura, Youichi; Yamanishi, Yoshiharu (25 January 2002), "Research and Development of Donepezil Hydrochloride, a New Type of Acetylcholinesterase Inhibitor" (http://www.jstage.jst.go.jp/article/jjp/89/1/7/_pdf), *The Japanese Journal of Pharmacology* (2002) **89** (1): 7–20, doi:10.1254/jjp.89.7 (http://dx.doi.org/10.1254%2Fjjp.89.7), retrieved 25 April 2011
20. ^ Kanoko Matsuyama (25 April 2011). "Eisai Aricept Patch for Alzheimer's Isn't Ready for Approval" (http://www.bloomberg.com/news/2011-04-25/eisai-says-fda-indicates-aricept-nda-not-ready-for-approval.html). Bloomberg. Retrieved 25 April 2011.
21. ^ "Ranbaxy gets FDA nod for Alzheimer's drug" (http://www.indianexpress.com/news/ranbaxy-gets-fda-nod-for-alzheimers-drug/718059/). *The Indian Express* (New Delhi, India: Indian Express Group). 30 November 2010. IndianExpress.com. Retrieved 25 April 2011.
22. ^ Staff Writer (25 April 2011). "Wockhardt Obtains US FDA Nod For Generic Version Of Aricept Tablets" (http://www.rttnews.com/ArticleView.aspx?Id=1604675). RTTNews. Retrieved 25 April 2011.

EXHIBIT C

External links

- Brenner, George D.; George M., PhD. Brenner (2000). *Pharmacology*. Philadelphia: W. B. Saunders. ISBN 0-7216-7757-6.
- Acting Editor-in-Chief Louise Welbanks. (2000). *Compendium of Pharmaceuticals and Specialities, 2000* (25th ed.). Canadian Pharmaceutical Assn. ISBN 0-919115-76-4.
- Official Aricept product site (http://www.aricept.com)
- Aricept entry at Drugs.com (http://www.drugs.com/aricept.html)
- http://www.websciences.org/cftemplate/NAPS/archives/indiv.cfm?ID=20081395
- 3D Molecular structure of Donepezil (http://proteopedia.org/wiki/index.php/Donepezil)
- Acetylcholinesterase: A gorge-ous enzyme (http://www.ebi.ac.uk/pdbe/quips?story=AChE) QUite Interesting PDB Structure article at PDBe (http://www.pdbe.org)

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